GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:5027
ANSWERED ON:16.12.2016
Tribal Healthcare
Mahadik Shri Dhananjay Bhimrao

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Government has undertaken any study regarding health indicators of tribals and the status of the tribal healthcare in the country;

(b) if so, the details thereof;

(c) whether lack of healthcare infrastructure, shortage of doctors and paramedical personnel are the reasons due to which tribals exhibit signs of poor nutritional status, higher levels of morbidity
and mortality and reduced utilization of ante-natal and post-natal services and if so, the details thereof and the reaction of the Government thereto; and

(d) the remedial measures taken by the Government in this regard?

Answer

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)
(a) & (b): No specific survey/ study was conducted by the Ministry for getting tribal health indicators. However surveys like National Family Health Survey (NFHS), and District Level Household Survey (DLHS), conducted by the Ministry give estimates inter-alia for tribal health indicators.

(c) & (d): There could be multiple reasons including social determinants of health for poor health and nutritional status of tribals. The information regarding some health indicators including nutrition and utilisation of ante-natal and post-natal services by scheduled tribes are at Annexure-I and Annexure-II respectively.

Public Health being a State subject, the primary responsibility to provide accessible, affordable and quality health care services to the people including tribal population lies with State/UT Governments. However, under the National Health Mission (NHM), support is provided to States/UTs to strengthen their health systems including for setting up/upgrading public health facilities, augmenting health human resource on contractual basis for provision of equitable, affordable healthcare to all its citizens particularly the poor and vulnerable population including tribal population based on requirements posed by the States in their Programme Implementation Plans. Under NHM, all tribal majority districts whose composite health index is below the State average have been identified as High Priority Districts (HPDs) and these districts are to receive more resources per capita under the NHM as compared to the rest of the districts in the State. These districts also receive focused attention and supportive supervision. Norms for infrastructure, Human resource, ASHAs, MMUs etc. under NHM are relaxed for tribal and hilly areas.